

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083830

**FILED**  
**Apr 28, 2005**  
**Secretary of State**

**Entity Name:** COSMO BEAUTY SUPPLY LLC

**Current Principal Place of Business:**

11117 WEST OKEECHOBEE RD  
201  
HIALEAH GARDENS, FL 33018 US

**Current Mailing Address:**

11117 WEST OKEECHOBEE RD  
201  
HIALEAH GARDENS, FL 33018 US

**FEI Number:** 83-0411704

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MASELLI, VINCENZO G  
4301 SW 160 AVE  
204  
MIRAMAR, FL 33027 US

**New Principal Place of Business:**

11117 WEST OKEECHOBEE RD  
207  
HIALEAH GARDENS, FL 33018 US

**New Mailing Address:**

11117 WEST OKEECHOBEE RD  
207  
HIALEAH GARDENS, FL 33018 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: MASELLI, VINCENZO G  
Address: 4301 SW 160 AVE APT.204  
City-St-Zip: MIRAMAR, FL 33027

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: VINCENZO MASELLI

MGR

04/28/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date